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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted With Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	PU040288
	First Named Inventor	Steven Porter Hotelling et al
	COMPLETE IF KNOWN	
	Application Number	/
	Filing Date	
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

PARASITIC QUADRATURE ERROR CORRECTION

the specification of which (Title of the Invention)

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) March 11, 2005 as United States Application Number or PCT International

Application Number PCT/US05/08372 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
US 60/552,652	March 12, 2004	

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to:		<input type="checkbox"/> Customer Number or Bar Code Label	24498	OR	<input checked="" type="checkbox"/> Correspondence address below
Name	JOSEPH S. TRIPOLI				
Address	THOMSON LICENSING INC.				
Address	PO Box 5312				
City	PRINCETON	State	NJ	ZIP	08543-5312
Country	USA	Telephone	317-587-4019	Fax	(609) 734 - 6888
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	STEVEN PORTER		Family Name or Surname	HOTELLING	
Inventor's Signature					Date
Residence: City	San Jose	State	California	Country	US
Citizenship	US				
Mailing Address					
Mailing Address 1351 Hidden Mine Road					
City	San Jose	State	California	ZIP	95120
Country	US				
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	LEX		Family Name or Surname	BAYER	
Inventor's Signature					Date
Residence: City	Menlo Park	State	California	Country	US
Citizenship	ZA				
Mailing Address					
Mailing Address 691 Roble Avenue, #4					
City	Menlo Park	State	California	ZIP	94306
Country	US				
<input checked="" type="checkbox"/> Additional Inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

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DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental Sheet
Page 3 of 3

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
BRIAN R.		LAND	
Inventor's Signature <i>Brian R. Land</i>		Date <i>4/19/2005</i>	
Residence: City	Redwood City	State	California
		Country	US
Mailing Address			
Mailing Address 2726 Sussex Way			
City	Redwood	State	California
		ZIP	94061
		Country	US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
		Country	
Mailing Address			
Mailing Address			
City		State	
		Zip	
		Country	
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Mailing Address			
Mailing Address			
City		State	
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	First Named Inventor	Steven Porter Hotelling et al
	COMPLETE IF KNOWN	
	Application Number	/
	Filing Date	
	Group Art Unit	
Examiner Name		

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					YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

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Address	THOMSON LICENSING INC.				
Address	PO Box 5312				
City	PRINCETON	State	NJ	ZIP	08543-5312
Country	USA	Telephone	317-587-4019	Fax	(609) 734 - 6888
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	STEVEN PORTER		Family Name or Surname	HOTELLING	
Inventor's Signature	<i>Steven Porter Hotelling</i>			Date	4/13/05
Residence: City	San Jose	State	California	Country	US
Citizenship	US				
Mailing Address					
Mailing Address 1351 Hidden Mine Road					
City	San Jose	State	California	ZIP	95120
Country	US				
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	LEX		Family Name or Surname	BAYER	
Inventor's Signature				Date	
Residence: City	Menlo Park	State	California	Country	US
Citizenship	ZA				
Mailing Address					
Mailing Address 691 Roble Avenue, #4					
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Inventor's Signature		Date	
Residence: City	Redwood City	State	California
Country	US	Citizenship	US
Mailing Address			
Mailing Address 2726 Sussex Way			
City	Redwood	State	California
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City	PRINCETON	State	NJ	ZIP	08543-5312
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Inventor's Signature					Date
Residence: City	San Jose	State	California	Country	US
Citizenship	US				
Mailing Address					
Mailing Address 1351 Hidden Mine Road					
City	San Jose	State	California	ZIP	95120
Country	US				
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	LEX		Family Name or Surname BAYER		
Inventor's Signature	<i>Joe Bayer</i>		Date		04/21/05
Residence: City	Palo Alto	State	California	Country	US
Citizenship	ZA				
Mailing Address					
Mailing Address 681 Roble Avenue #4					
City	Palo Alto	State	California	ZIP	94306
Country	US				
<input checked="" type="checkbox"/> Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

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BRIAN R.		LAND	
Inventor's Signature		Date	
Residence: City	Redwood City	State	California
		Country	US
Mailing Address		Citizenship	
Mailing Address		US	
Mailing Address		2726 Sussex Way	
City	Redwood City	State	California
		ZIP	94061
		Country	
US			
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
		Country	
Mailing Address		Citizenship	
Mailing Address			
Mailing Address			
City		State	
		Zip	
		Country	
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Inventor's Signature		Date	
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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number

Filing Date

First Named Inventor

STEVEN PORTER HOTELLING, ET AL.

Title

ERROR CORRECTION FOR VIBRATORY RATE
GYROSCOPE

Art Unit

Examiner Name

Attorney Docket Number

PU040288

I hereby appoint:

☒ Practitioners at Customer Number

Customer Number 24498

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number:

OR

☐ The address associated with Customer Number:

OR

☒ Firm or
Individual Name

Joseph J. Laks, THOMSON LICENSING INC.

Address

PATENT OPERATIONS

Address

P. O. BOX 5312

City

PRINCETON

State

NJ

ZIP

08543-5312

Country

USA

Telephone

609-734-6819

Fax

609-734-6888

I am the:

☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.

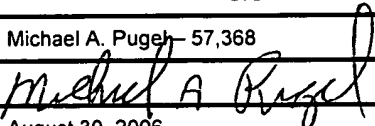
Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Michael A. Pugeh- 57,368

Signature



Date

August 30, 2006

Telephone

317-587-4027

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 3 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

POWER OF ATTORNEY
THOMSON LICENSING

THOMSON LICENSING
46, Quai A. Le Gallo
F-92100 Boulogne-Billancourt
France

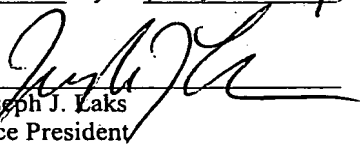
does hereby grant

Harvey D. Fried - Sr. Patent Counsel/Manager
Ronald H. Kurdyla - Sr. Patent Counsel/Manager
Robert D. Shedd - Sr. Patent Counsel/Manager
Robert B. Levy - Sr. Patent Counsel/Manager
Frank Y. Liao - Sr. Patent Counsel/Manager
Reitseng Lin - Sr. Patent Counsel
Christine Johnson - Sr. Patent Counsel
Guy H. Eriksen - Sr. Patent Counsel
Catherine A. Ferguson - Sr. Patent Counsel
Joseph J. Kolodka - Sr. Patent Counsel
Kuniyuki Akiyama - Sr. Patent Counsel
Paul P. Kiel - Sr. Patent Counsel
Jeffrey M. Navon - Sr. Patent Counsel
Joel M. Fogelson - Sr. Patent Counsel
Joseph J. Opalach - Sr. Patent Counsel
Sammy S. Henig - Sr. Patent Counsel
Patricia A. Verlangieri - Sr. Patent Counsel
Brian J. Dorini, Sr. Patent Counsel
Jorge Tony Villabon - Patent Counsel
Vincent E. Duffy - Patent Counsel
Richard LaPeruta - Patent Counsel
Francis A. Davenport - Sr. Patent Agent
William A. Lagoni - Patent Agent
Brian J. Cromarty - Patent Agent
Ronald Kolczynski - Member Patent Staff
Michael A. Pugel - Patent Agent
Thomson Licensing Inc.
Two Independence Way
Princeton, New Jersey 08540

a revocable, non-exclusive and delegable power of attorney to act for us (including the signing of requisite documents) in proceedings concerning patents and applications for patents, including international and other multi-country patents and applications for patents, in our name in the Patent Offices in all countries worldwide from July 1, 2005.

DATED this 27th day of February, 2006.

SIGNED


Joseph J. Laks
Vice President
Thomson Licensing Inc. and
Attorney In Fact for
THOMSON LICENSING

WITNESS



**POWER OF ATTORNEY
THOMSON LICENSING**

We,

THOMSON LICENSING
46, Quai A. Le Gallo
F-92100 Boulogne-Billancourt
France

do hereby grant

Joseph J. Laks
Vice President
Thomson Licensing Inc.
Two Independence Way
Princeton, New Jersey 08540

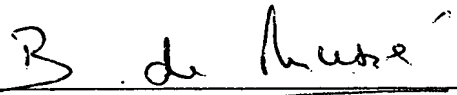
a revocable, non-exclusive and delegable power of attorney to act for us (including the signing of requisite documents) in proceedings concerning patents and applications for patents, including international and other multi-country patents and applications for patents, in our name in the Patent Offices in all countries worldwide from July 1, 2005

DATED this ____14th____ day of __February__, in the year 2006.

Signature:

Typed Name As Signed:

Title:


Béatrix de Russé
Authorized Representative,
Vice-President Intellectual Property & Licensing

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